## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)  National Rifle Association of America Political Victory Fund	FEC IDENTIFICATION NUMBER ▼  C C00053553	
Check if 24-hour report 48-hour report New report Amends report filed	d on	
Full Name of Payee Prolist Inc.  Mailing Address 4510 Buckeystown Pike, Suite M	Date of Public Distribution/Dissemination  10 04 2016  Amount	
City State Zip Code Frederick MD 21704-7539	35035.83  Transaction ID : 74032529  Date of Disbursement or Obligation	
Purpose of Expenditure Postage  Category/ Type  004	M = M / D = D / Y = Y = Y	
Trump Donald I	e Sought: House District:  President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For:	
Full Name of Payee Prolist Inc.  Mailing Address 4510 Buckeystown Pike, Suite M	Date of Public Distribution/Dissemination  10  04  2016	
City State Zip Code	Amount 35035.83	
Frederick MD 21704-7539  Purpose of Expenditure Postage Category/ Type 004	Transaction ID : 74032530  Date of Disbursement or Obligation	
Name of Federal Candidate  Rubio, Marco, , ,  Oppose  Office	President	
Calendar Year-To-Date Per Election for Office Sought  Disb	oursement For: Primary General  Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	70071.66	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Adkins, Mary Rose, , ,  [Electronically Filed] Date	10 06 7 2016	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)  National Rifle Association of America Political Victory Fund		FEC IDENTIFICATION NUMBER ▼
		C C00053553
Check if 24-hour report 48-hour report New report	t Amends report filed o	n M = M / D = D / Y = Y = Y = Y
Full Name of Payee Prolist Inc.		Date of Public Distribution/Dissemination
		10 04 2016
Mailing Address 4510 Buckeystown Pike, Suite M		Amount
City State Z	lip Code	9448.83
	21704-7539	Transaction ID : 74032532 Date of Disbursement or Obligation
Purpose of Expenditure Postcards	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	X Support Office S	Sought: House District:
Trump, Donald, J, ,		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	0.00 Disburs	ement For: Primary X General
Tel Election for Office Sought		Other (specify) -
Full Name of Payee  Prolist Inc.		Date of Public Distribution/Dissemination
Mailing Address 4510 Buckeystown Pike, Suite M		10 04 2016
4310 Buckeystown Fike, Guite W		Amount
City State Z	Zip Code	9448.83
		ransaction ID: 74032533 Date of Disbursement or Obligation
Purpose of Expenditure Postcards	Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate	X Support Office	Sought: House District:
Rubio, Marco, , ,	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	0.00 Disburs 2016	sement For: Primary <b>X</b> General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	• [	18897.66
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	88969.32
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Adkins, Mary Rose, , , [Electronical	ally Filed] Date 10	06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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OF

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